

Allergan Docket No. 17571
US Patent Application Serial No. 614,408

DOCKET NO. 17571(AP)
PATENT



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of Boix.

Customer No.: 051957
Serial No: 10/614,408
Conf. No.: 4873
Filed: July 2, 2003

Group Art Unit: 1618

Examiner: Eric E. Silverman

For METHOD OF STERILIZATION OF
POLYMERIC MICROPARTICLES

Commissioner for Patents
Alexandria, VA 22313-1450

TRANSMITTAL SHEET

Sir:

Transmitted herewith is an amendment for filing in the above-identified application. Enclosed are:

- 1) Amendment (7 pgs.)
- 2) Transmittal Sheet
- 3) Request for One (1) Month Extension of Time for Response
- 4) Return/Stamped Postcard

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Mail Stop Amendment - Non-Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

January 5, 2009
(Date of Deposit)

Robert J. Baran
Name of person mailing correspondence

January 5, 2009
Date of Signature

RJ Baran
Signature

Docket No. 17571
Serial No. 10/614,408

The fee has been calculated as shown below:

CLAIMS AS FILED

FOR	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
Total Claims	12	80	= -0- x	\$52.00	\$0.00
Independent Claims	3	3	= -0- x	\$200.00	\$0.00
If application contains any multiple dependent claims, then add			= -0-	\$360.00	\$0.00
Terminal Disclaimer Fee:	-0-		x \$110.00	=	\$0.00
Request for Continued Examination (RCE)				\$790.0	\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

* If the entry in Col. A is less than the entry in Col. B, write "0" in Col. C

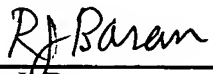
** If the highest number previously paid for IN THIS SPACE is less than 20, write "20" in this space

*** If the highest number previously paid for IN THIS SPACE is less than 3, write "3" in this space

- () A check in the amount of \$* is enclosed (place fee in here i.e., petition, excess claims, etc.)
- (x) The Commissioner is hereby authorized to charge fees under 37 CFR 1.16 and 1.17 (associated with petition fees or excess claim fees) which may be required, or credit any overpayment to Deposit Account No. 01-0885. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

Date: January 5, 2009

Signature: 

Robert J. Baran
Registration No. 25,806

Telephone (949) 851-1105
Fax: (949) 752-1925